POSITION	INITIALS	ID NO.	DATE]
FEE DETERMINATION	12011 21		18-12-11	
O.I.P.E. CLASSIFIER				1
FORMALITY REVIEW	n_	40		
RESPONSE FORMALITY REVIEW			BEST AVE	YACO ILL'IN

INDEX OF CLAIMS

•	Rejected	N	Non-elected
	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
·	Restricted	0	Objected

· · · · · · · · · · · · · · · · · · ·	Restricted U	Objected
Claim Date	Claim Date	Claim Date
		- I
Final Original 10/1/02 5/1/02 2/1/02	Final Original 1/13/01	Original
Final Origin (9/1/2)		
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	52	102
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	57	107
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27		127
28 V	78	128
29	79	129
30	80	130
31 V	81	131
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34	84	134
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If more than 150 claims or 10 actions staple additional sheet here

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